

**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Patent Number	7,055,110
Issue Date	May 30, 2006
First Named Inventor	Sig G. Kupka
Group Art Unit	N/A
Examiner Name	N/A
Attorney Docket Number	23412-8081

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified patent application. The client has been duly notified of this request for withdrawal and provided with all papers and property to which the client is entitled.

The reasons for this request are:

The client knowingly and freely assents to termination of the employment. The client discharged the practitioners designated below by instructing that the subject application be transferred to other patent counsel. The client and the new patent counsel have been informed of upcoming docketed items pertaining to the subject application.

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

Firm or Individual Name	Amir H. Raubvogel, Attorney at Law				
Address	820 Lakeview Way				
Address					
City	Redwood City	State	CA	Zip	94062
Country	USA				
Telephone	(650) 209-4884	Fax	(650) 362-1800		

- ☐ This request is made on behalf of myself and
- ☐ all the attorneys/agents of record,
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 758
- on whose behalf I have signed this request and on whose behalf I am authorized to sign.

Name	Amir H. Raubvogel
Signature	/ Amir H. Raubvogel/
Date	March 23, 2007

NOTE: Withdrawal is effective when approved rather than when received.
Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.